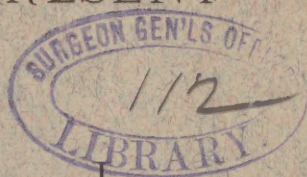


Shew (A.M.)

A GLANCE

—AT THE—

PAST AND PRESENT



CONDITION OF THE INSANE,

—BY—

A. M. SHEW, M. D.

*Extract from the Fourteenth Annual Report of the
Connecticut Hospital for the Insane.*

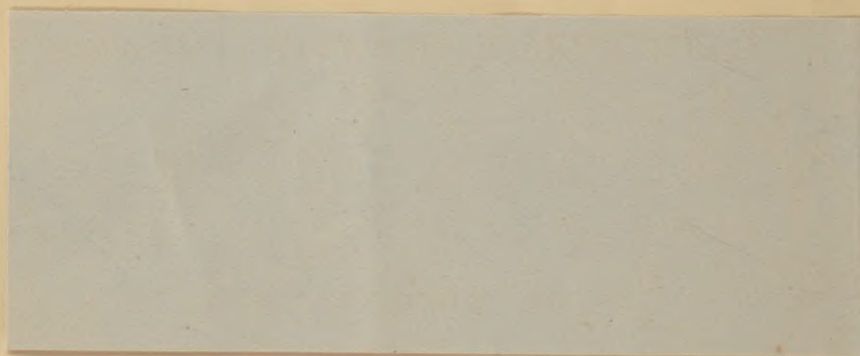
MIDDLETOWN, CONN.

PELTON & KING, STEAM PRINTERS AND BOOKBINDERS, EAST COURT STREET.

1880.

Compliments of

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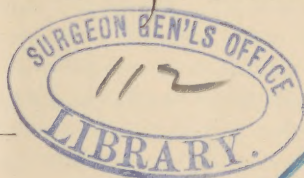
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Past and Present Condition of the Insane.

It is evident to the most casual observer that the public are not wholly satisfied with the present condition of the insane. The objectors assert with reason that it is unjust to provide good accommodations for a part, while as many more equally worthy are languishing in almshouses. Some people would abolish asylums and let each family provide as best they could for their afflicted members. Others advocate a system of cottages, pavilions, or colonies like Gheel, or the promiscuous boarding out of insane people, overlooking the fact that all of these supplemental plans have been tried—have proved more or less useful as auxiliary measures, but have failed to meet the great requirements of governmental systems. And still others have gone to the extreme of asserting that we are all insane, or that no one is insane, and that it is unjust to deprive any one of his liberty for this cause. These persons talk loudly about the abuses in asylums, and would place the officers on a par with the criminal keepers of old Bedlam in the sixteenth century. Disagreeable as it may be for conscientious Christian workers in this humane field to remain quiet under such unjust accusations, I am not sure that it is on the whole an evil; for it stimulates all to best endeavors, and throws around the insane every necessary safeguard. In this connection it may not be inappropriate for me to briefly review the history of the insane and their treatment from the earliest times. This will serve to show not only how much more skillfully and humanely they are provided for now, but also some of the causes which led to these favorable results. Insanity has existed from the earliest periods. Some forms of mental disorder are delineated in the Old Testament. The Greek writers mention cases of mental aberration, and the Egyptians had temples and priests dedicated to the care of the insane. But Hippocrates was the first physician who seemed to have any true conception of the real nature of insanity. It was not until the sixth century that any attempt was made to provide for deranged persons in asylums. To the Monks of Jerusalem is awarded the honor of having built the first hospital for the care of their fellows whose minds had become affected.

Where in the annals of history is recorded a more courageous or a nobler act? This brave physician, alone, unsupported, and fearless, did more to elevate and ennoble this branch of science than all who had gone before him. We do not wonder that a celebrated artist should have seized upon this event as a worthy study for a masterpiece; or that the painting while hanging in the French department of the Paris Exposition, should have been continually surrounded by a throng of eager visitors.

Notwithstanding the success which attended Pinel's labors, the reform which he instituted was slow in its advances, and we find many years after his death, *chains in common use in the treatment of the insane on the continent of Europe, outside of the great university cities, and in Great Britain.

† "In 1815 patients were chained to the walls of the best Asylums of London. At Fonthill thirteen out of fourteen were in irons, and in another Asylum there was one towel to 170 patients." In 1822, in some countries, jails were used as asylums without change of structure.

At Bethnal Green in 1827, with 500 inmates, patients were chained to their cribs and confined from Saturday evening till Monday morning in order to give their attendants a Sunday holiday.

No physician or surgeon was in charge, but an apothecary made visits two or three times a week. At Lincoln Asylum 39 of the 92 patients were continuously restrained. But it is unnecessary to multiply examples from the official records. Enough has been said to show that like all great reforms the improvement in the condition of the insane was slow and almost imperceptible until the labors of Pinel and Esquirol in France, Tuke, Gardiner Hill and Conolly in England, and Rush, Wyman and Todd in America, had shown to the world that the humane care of the insane was not only possible, but also necessary and economical. It must ever be gratifying to us as Americans to remember the part our country has exercised in this good work. For a period of nearly half a century, it is generally conceded that American Alienists were more prompt in adopting and more thorough in executing principles of reform, than those of the older established communities of Europe.

At the time when Conolly had only begun his great work in England, Miss Dix was directing the attention of the legislature to the deplorable condition of the insane in the poor houses and jails of Massachusetts.

* Dr. Folsom. Disease of Mind. Page 10.

† Dr. Folsom. Page 13.

In 1837, Dr. Browne of Edinburgh, said: "In some parts of America there appears to be an ample realization of all that I have wished to inculcate as necessary to place the lunatic in that condition which is most conducive to his happiness and recovery." Writing from England in 1841, Dr. Edward Jarvis said: "Most of the American Asylums are doing more for the cure of insanity than any others in the world."

From that period to the present, there has been constant progress. This half century has witnessed the abolition of nearly all kinds of mechanical restraint, and the substitution of moral persuasion, gentleness and kindness together with more intelligent treatment, based on clinical and pathological studies.

The old Bedlam, with its narrow halls and its darkened cells, has given place to our cheerful, commodious and well ventilated modern hospital. Even in the old asylum buildings great improvements have been introduced; and the personal comfort of the patients is more and more an object of solicitude and study.

The introduction of amusements, entertainments and mechanical occupations; gatherings for religious exercises, readings and recitations; systems of regular exercise by walking and working, are but a few of the means embraced in the moral treatment at every well regulated asylum.

Careful inspection of the best hospitals in England, and a few in Germany and France, has convinced the writer that the construction, organization and general management at hospitals in the United States compare favorably with the best in Europe.

The improvement in asylum buildings has been so marked that many conscientious alienists believe that the expensively constructed hospitals in New York and Massachusetts are unwarranted, in view of the purposes for which they are created—an opinion in which I heartily concur. All improvements and any expense that will add to the health or comfort of the insane, are justifiable. A due regard should be paid to durability, security and safety from fire. But ornate architectural embellishments and lavish expenditures in finish and furnishing, are not justifiable in our State Hospitals. Simplicity and convenience in plan, and durability in construction, should be the controlling considerations.

This brief retrospect shows that, compared with any period of the past, the insane of to-day are receiving humane care in the spirit of intelligent, Christian kindness.

In searching for the causes which have led to these improvements, we recognize three distinct periods of time, and certain elements of

professional labor as most important factors. In the first period, extending to 1792, the insane were considered unworthy of sympathy, because of their supposed possession of devils or evil spirits. Hence their care was left to criminals and rough keepers, without the supervision of medical men. The second period extends from 1792 to 1830, during which time the old asylums were remodeled, new ones erected, and all organized on the same basis as general hospitals for sick or surgical cases. A steward was placed in charge of the general management, while attending physicians—not resident—visited the patients and prescribed for their ailments. This was a great stride towards perfection and resulted in positive good to the insane. But the experiences of this period were sufficient to show that it was necessary to go one step farther. The superintending physicians must reside in the building—live with their patients—have hourly communication with them to know their thoughts and delusions, before they could exercise full medical and moral control. Hence another radical change in the organization of hospitals took place, and the third period began. Superintending physicians were appointed, having full control, under a board of trustees and managers, of the professional and general affairs of the institution. Their time was devoted to the work. Attendants and employes held office only during good behavior. Improvement soon became manifest in the general morale of the institution. Home life was developed, and, in short, hospitals were elevated to the rank of homes for the insane, governed on the same broad principles as those which are necessary to success in the management of railroads, manufacturing concerns, ships or armies. The principle of a responsible head with undivided authority succeeded that of limited authority.

The results have been manifest during the past half century, in the almost total abolition of mechanical restraint, greater freedom, the introduction of amusements, exercise games and labor as auxiliary to medical treatment. During this period medical men in charge of hospitals have vied with one another in effecting reforms; and it is owing largely to their individual efforts that the insane of this age enjoy so many privileges. Ambitious on the one hand to enlarge these privileges, they are conservative on the other in wishing to check visionary projects. Investigation of this subject will convince any unprejudiced mind, that they, and not the extremists, are the true friends of the insane. Undoubtedly much remains to be accomplished. The field of labor is large and the workmen few. But in the future, as in the past, intelligent experience should be the controlling influence.



